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PTO/SB/05 (11-00) Approved for use through 10/31/2002. OMB 0651-0032

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UTILITY **PATENT APPLICATION TRANSMITTAL**

Please type a plus sign (+) inside this box —

Attorney Docket No.

First Inventor

APPARATUS FOR CLEANSING HANDS

| APPLICATION ELEMENTS See MPEP chapter 600 concerning using patient application contents APPLICATION ELEMENTS | (Only for new nonprovisional applications under 37 CFR 1.53(b)) | Express Mail Label No. ET397797481 US | | | | |
|--|--|---|--|--|--|--|
| See Mr-P Capitor OUL concerning utility patient application contents Framework Frame | | | | | | |
| See 37 CFR 1.27. See 37 CFR 1.27. Total Pages | 1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a displicate for fee processing) | 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) | | | | |
| Descriptive title of the invention Cross Reference to Related Applications Statement Regarding Fed sponsored R & D Reference to sequence listing a papendix Background of the Invention Brief Summary of the Invention Summary of the Invention of the Coopers of the Summary of the Invention S | See 37 CFR 1.27. Specification [Total Pages 2] | Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) | | | | |
| Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. Drawing(s) (35 U.S.C. 113) [Total Sheets | Descriptive title of the invention Cross Reference to Related Applications | b. Specification Sequence Listing on | | | | |
| - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. Drawing(s) (35 U.S.C. 113) Total Sheets 7 5. Oath or Declaration Total Pages 2 5. Oath or Declaration Total Pages 2 6. Drawing(s) (35 U.S.C. 113) Total Sheets 7 7. Oath or Declaration Total Pages 2 7. Oath or Declaration Total Pages 2 8. Newly executed (original or copy) 11. English Translation Document (if applicable) 12. Statement (IDS)-TO-1449 Claitions 8. Newly executed (original or copy) 13. Preliminary Amendment 14. Statement (IDS)-TO-149 Claitions 15. Clay from a prior application (37 CFR 1.63 (d)) 14. Statement (IDS)-To-149 Claitions 15. Clay from a prior application with Box 18 completed) 15. Claitions 15. Clay from a prior application and the Box 18 completed 15. Claitions 15. Clay from a prior application and the prior application, see 37 CFR 15. Clay from a prior application and a supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet. See 37 CFR 1.76 15. Clay (10) (2) (10) (10) (10) (10) (10) (10) (10) (10 | Reference to sequence listing, a table, or a computer program listing appendix | ii 🔲 paper | | | | |
| - Detailed Description - Claimin(s) - Abstract of the Disclosure 4. | - Brief Summary of the Invention | | | | | |
| - Abstract of the Disclosure - Attorney - Abstract of the Disclosure - Attorney - Abstract of the Disclosure - Information Disclosure - Copies of IDS - Carpical of Lattons - Capies of IDS - Cap | | | | | | |
| 4. Drawing(s) (35 U.S.C. 113) [Total Sheets 9] 11. English Translation Document (if applicable) 5. Oath or Declaration [Total Pages 2] 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 8. Newly executed (original or copy) 9. Newly executed (original or copy) 10. Copy from a prior application (37 CFR 1.63 (d)) (for continuation with Box 18 completed) 11. DELETION OF INVENTOR(S) (Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63 (d)) (2) (2) (8) (i). Application under 35 U.S.C. 122 (b)(2)(8) (i). Application under 35 U.S.C. 122 (b)(2)(8) (i). Application Data Sheet under 37 CFR 1.76: (b) (2) (B) (i). Application below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: (continuation Data Sheet | | 37 CFR 3.73(b) Statement Power of | | | | |
| a. Newly executed (original or copy) b. Original or copy (Copy from a prior application (37 CFR 1.63 (d)) (for continuation/indivisional with Box 18 completed) i. DELETION OF INVENTOR(S) (Should be specifically itemized) i. Signed statement attached deleting inventor(s) named in the pnor application, see 37 CFR (163(d)/2) and 1.33(b). 6. Application Data Sheet. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76. 19. If a CONTINUING OF DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box Sb, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number or Bar Code Label PETER S. SWEDEKER 6 WEST SHORE ORIVE Address City PENNING TON State New Years Zip Code O85344 Country UNITEO STATES Telephone 6098/8/1722 Fax 6098/8/1099 Name (Print/Type) Peters Sneedeker Registration No. (Attorney/Agent) | 4. Drawing(s) (35 U.S.C. 113) [Total Sheets 9] | 11. English Translation Document (if applicable) | | | | |
| a. Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63 (d)) for continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 183(d)(2) and 1.33(b). 6. Application Data Sheet. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Examiner Group Art Unix For Continuation Divisional Examiner Group Art Unix For Continuation OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box Sb, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inavervently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number or Bar Code Label PETER S. SWEDEKER 61 WEST SHORE DRIVE Address City PENNING TON State New Years Zip Code O85344 Country UNITEO STATES Telephone 6098/19/1722 Fax 6098/19/1949 Name (Print/Type) Registration No. (Attorney/Agent) | 5. Oath or Declaration [Total Pages 2] | | | | | |
| 14. Should be specifically itemized 14. Should be specifically itemized 15. Should be specifically itemized 16. | a. Newly executed (original or copy) | 13. Preliminary Amendment | | | | |
| Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 163(d)(2) and 1.33(b). 6. Application Data Sheet. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Data Sheet under 37 CFR 1.76: Ten prior application No. Frior application No. Frior application No. Continuation Data Sheet under 37 CFR 1.76: Ten prior application No. Continuation or divisional application no at no declaration is supplied under bear of the prior application. The material paper of the prior application of the under supplied under bear of the prior application. The material paper of the prior application of the under supplied under bear of the prior application of the under supplied under bear of the prior application of the under supplied under bear of the prior application of the under supplied under bear of the prior application of the under supplied under bear of the prior application of the under supplied under bear of the prior application of the under supplied under bear of the prior application of the under suppli | (for continuation/divisional with Box 18 completed) | 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) | | | | |
| named in the prior application, see 37 CFR 163(d)(2) and 1.33(b). 6. Application Data Sheet. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No / / Prior application Information Examiner Group Art Unix For CONTINUINATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box Sb, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number or Bar Code Label C | | | | | | |
| Application Data Sheet. See 37 CFR 1.76 17. Other: 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of pnor application No Prior application information Examiner Group Art Unit For CONTINUINTION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number or Bar Code Label PETER S. SWEDEKER 61 WEST SHORE DRIVE Address City PENNIAIGTON State AIEW JEAST Zip Code 08534 Country CNITEO STATES Telephone 609 \$181722 Fax 609 \$18 1094 Name (Printi Type) Peter Snedeker Registration No. (Attorney/Agent) | named in the prior application, see 37 CFR 1 63(d)(2) and 1.33(b). | Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 | | | | |
| Continuation Data Street direct 37 CFK 1.76. Continuation Divisional Continuation Divisional Divisional Examiner Group Art Unit For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number or Bar Code Label Customer Number or Bar Code Label PETER S. SWEDEKER 61 WEST SHORE DRIVE Address City PENNING TON State NIEW JERSEY Zip Code 08534 Country UNITEO STATES Telephone 609 3/8/1722 Fax 6098/8/1094 Name (Print/Type) Refers Snedeker Registration No. (Attorney/Agent) | Typhication Data Sheet. See 37 CFK 1.70 | 17. Other: | | | | |
| Continuation Divisional Continuation-In-part (CIP) of pnor application No | 18. If a CONTINUING APPLICATION, check appropriate box, and supply or in an Application Data Sheet under 37 CFR 1 76 | the requisite information below and in a preliminary amendment, | | | | |
| Prior application information Examiner Group Art Unit For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number or Bar Code Label Customer Number or Bar Code Label PETER S. SWEDEKER 61 WEST SHORE ORIVE Address City PENNINGTON State NIEW JERSEY Zip Code 08534 Country UNITED STATES Telephone 6098181722 Fax 6098181034 Name (Print/Type) Peter Snedeker Registration No. (Attorney/Agent) | | of pnor application No/ | | | | |
| The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number or Bar Code Label PETER S. SWEDEKER 61 WEST SHORE DRIVE Address City PENNINGTON State NIEW JERSET Zip Code 08534 Country United States Telephone 6098181732 Fax 6098181094 Name (Print/Type) Peters Snedeker Registration No. (Attorney/Agent) | Examinor | Group Art Unit | | | | |
| 19. CORRESPONDENCE ADDRESS Customer Number or Bar Code Label PETER S. SWEDEKER 61 WEST SHORE DRIVE Address City PENNING TON State Alew Tensor Zip Code 08534 Country United States Telephone 6098181722 Fax 6098181094 Name (Print/Type) Registration No. (Attorney/Agent) | | | | | | |
| Customer Number or Bar Code Label PETER S. SWEDEKER 61 WEST SHORE DRIVE Address City PENNINGTON State Alew Jersey Zip Code 08534 Country UNITED STATES Telephone 6098181722 Fax 6098181094 Name (Print/Type) Peter Snedeker Registration No. (Attorney/Agent) | <u>sent only</u> so reneal upon when a portion has been inadvertently omitted from the submitted application parts. | | | | | |
| Address City PENNINGTON State NEW JERST Zip Code 08534 Country UNITED STATES Telephone 6098181722 Fax 6098181094 Name (Print/Type) Peter Snedeker Registration No. (Attorney/Agent) | Customer Number of Box Code Label | | | | | |
| Address City PENNINGTON State NEW JERSEY Zip Code 08534 Country UNITEO STATES Telephone 6098181722 Fax 6098181094 Name (Print/Type) Peter Snedeker Registration No. (Attorney/Agent) | Name PETER S. SWE | DEKER | | | | |
| City PENNIAIGTON State Alew Jeaser Zip Code 08534 Country UNITEO STATES Telephone 6098181722 Fax 6098181094 Name (Print/Type) Peter Snedeker Registration No. (Attorney/Agent) | | | | | | |
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| Name (Print/Type) Peter Snedeker Registration No. (Attorney/Agent) | | State NEW JERSEY Zip Code 08534 | | | | |
| Circulation of the Control of the Co | Country UNITEO STATES Telep | hone 6098181722 Fax 6098181094 | | | | |
| Signature Sheeddees Date 6/23/11 | Name (Print/Type) Peters Snedeker | Registration No. (Attorney/Agent) | | | | |
| arden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the peeds of the individual case. Any complete | Control of the state of the sta | Date 6/23/01 | | | | |

burden Hour Statement. This form is estimated to take 0.2 nours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

JAMES PHYFE SNEDEKER

Patent Application Commissioner for Patents Washington, DC 20231 27 June, 2001

Apparatus for Cleansing Hands

Dear Sirs:

My son and I are pleased to forward our Utility Patent Application and accompanying documentation.

We are also forwarding a stamped, self-addressed postcard to confirm your receipt of the attached.

Over the past year we have conducted an extensive consumer survey relating to this apparatus. In addition, we have developed various marketing material for our discussions with potential business partners. If you wish, we will be pleased to share this material with you.

Sincerely,

61 West Shore Drive Pennington, N.J. 08534

PTO/SB/17 (11-00)
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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

| TOTAL | AMOUNT | OF | PAYMENT |
|-------|---------------|-----------|----------------|
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| Complete if Known | | | | | | |
|----------------------|-------|----|----------|--|--|--|
| Application Number | | | | | | |
| Filing Date | | | | | | |
| First Named Inventor | PETER | S. | SNEDEKER | | | |
| Examiner Name | | | _ | | | |
| Group Art Unit | | | | | | |
| Attorney Docket No. | | | | | | |

| METHOD OF PAYMENT | | | | FI | EE CALCULATION (continued) | |
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| The Commissioner is hereby authorized to charge | 3. AD | DITI | ONA | AL FE | ES | |
| indicated fees and credit any overpayments to: Deposit | | Large | | Sma | *** | |
| Account Number | Fee | Entity Fee | | Entit | • | Fee Paid |
| Deposit | Code | (\$) | Code | | | 1001 010 |
| Account Name | | | 205 | 65 | Surcharge - late filing fee or oath | |
| Charge Any Additional Fee Required Under 37 CFR 1 16 and 1 17 | 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| Applicant claims small entity status See 37 CFR 1 27 | 139 | 130 | 139 | 130 | Non-English specification | |
| | 147 2, | 520 | 147 | 2,520 | For filing a request for ex parte reexamination | |
| Check Credit card Money Other | | 920* | | 920* | Requesting publication of SIR prior to Examiner action | |
| FEE CALCULATION | 113 1, | 840* | 113 | 1,840* | * Requesting publication of SIR after Examiner action | |
| 1. BASIC FILING FEE | 115 1 | 110 | 215 | 55 | Extension for reply within first month | |
| Large Entity Small Entity | 116 3 | 390 | 216 | 195 | Extension for reply within second month | |
| Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid | 1 | | 217 | | Extension for reply within third month | |
| 101 710 201 355 Utility filing fee 355. | 118 1, | 390 | 218 | 695 | Extension for reply within fourth month | |
| 106 320 206 160 Design filing fee | 128 1, | 890 | 228 | 945 | Extension for reply within fifth month | |
| 107 490 207 245 Plant filing fee | 119 3 | 310 | 219 | 155 | Notice of Appeal | |
| 108 710 208 355 Reissue filing fee | 120 3 | 310 | 220 | 155 | Filing a brief in support of an appeal | |
| 114 150 214 75 Provisional filing fee | 1 | | 221 | | Request for oral hearing | |
| SUBTOTAL (1) (\$) 355. | | | 138 1 | | Petition to institute a public use proceeding | |
| SUBTOTAL (1) (\$) 355. 2. EXTRA CLAIM FEES | 1 | | 240 | 55 | Petition to revive - unavoidable | |
| Fee from | 141 1,: 142 1,: | | 241 242 | 620 620 | Petition to revive - unintentional Utility issue fee (or reissue) | |
| Total Claims | | | 242 243 | | Design issue fee | |
| Independent - 3** = X = | ı | | 244 | | Plant issue fee | |
| Multiple Dependent | 122 1 | 130 | 122 | 130 | Petitions to the Commissioner | |
| | 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17(q) | |
| Large Entity Small Entity Fee Fee Fee Fee Fee Description | 126 1 | 180 | 126 | 180 | Submission of Information Disclosure Stmt | |
| Code (\$) Code (\$) | 581 | 40 | 581 | 40 | Recording each patent assignment per | |
| | 146 | 740 | 040 | 055 | property (times number of properties) | |
| 102 80 202 40 Independent claims in excess of 3 104 270 204 135 Multiple dependent claim, if not paid | 146 7 | 710 | 246 | 355 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 109 80 209 40 ** Reissue independent claims over organal patent | 149 7 | 710 : | 249 | 355 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 110 18 210 9 ** Reissue claims in excess of 20 | 179 7 | 710 | 279 | 355 | Request for Continued Examination (RCE) | |
| and over original patent | 169 9 | 000 | 169 | 900 | Request for expedited examination | |
| SUBTOTAL (2) (\$) | | of a design application Other fee (specify) | | | | |
| **or number previously paid, if greater, For Reissues, see above | *Reduce | ed by | Basic | Filing | Fee Paid SUBTOTAL (3) (\$) | |

| SUBMITTED BY | | Complete (if applicable) | | |
|-------------------|---------|--------------------------|-----------------------------------|------------------------|
| Name (Print/Type) | Peter 5 | Snedeker | Registration No. (Attorney/Agent) | Telephone 609 818 1722 |
| Signature | fette 8 | Sneoleker | | Date 6/23/01 |

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